

CERTIFIED MAIL

November 10, 1989

Ms. Carrie Sikorski
U.S. Environmental Protection Agency
RCRA Permits
Region X
1200 Sixth Avenue
Seattle, WA 98101

RE: Pier 91 Dangerous Waste Facility Part B Permit Application Owner Certifications

Please find enclosed 2 copies of the required owner certifications for the Chemical Processors, Inc. Pier 91 Facility Part B permit application.

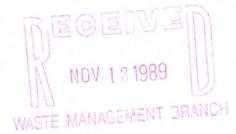
This includes a Part A owner certification and a owner certification (based on the Washington requirements) signed by the Port of Seattle.

If you have questions, please contace me at (206) 223-0500.

Sincerely,

Susan Donahue

Environmental Programs Manager



Chempro

Pier 91 Part B Permit Application

Instructions

- 1) Replace page 4 Of 5 of the Part A in Section A
- 2) Replace page K 2 with new page K 2 in Section K

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. FACILITY DRAWING	•			
All existing facilities must include in the space provided on particles. I. PHOTOGRAPHS	age 5 a scale drawing of	the facility (see instructions	s for more detail).	•
All existing facilities must include photographs (aerial or ground	nd—level) that clearly de	lineste all existing etgycture	e: existing alorses, treatment	
sites of future storage, treatment or disposal areas (see instr	uctions for more detail).	mired an existing attoctore	s, existing stotage, treatment	and disposal ereas; and
II. FACILITY GEOGRAPHIC LOCATION				
LATITUDE (degrees, minutes, & seco	onds)	L	ONGITUDE (degrees, minutes,	& seconds)
4 7 3 8 0 8 N			12225	O W
III. FACILITY OWNER				
A. If the facility owner is also the facility operator as listed in B. If the facility owner is not the facility operator as listed in				p to obtain to below.
1. NAME OF	FACILITY'S LEGAL OWNER	, , , , , , , , , , , , , , , , , , , 	2. F	PHONE NO. (area code & no.)
PORT OF SEATTLE			2 0	6 - 3 8 2 - 3 3 7 0
3. STREET OR P.O. BOX		4. CITY OR TOWN	5. ST.	6. ZIP CODE
PO, BOX, 12,0,9,	S,E,A,T,	r I. F.	WA	9 8 1 1 1
. OWNER CERTIFICATION			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
OWNER CERTIFICATION				
I certify under penalty of law that I have person documents, and that based on my inquiry of the submitted information is true, accurate, and con including the possibility of fine and imprisonment.	ose individuals imme	diately responsible to	r obtaining the informat	ion I helieve that the
AME (print or type)	SIGNATURE	H	DATE SIGNE	
JOHN G. BELFORD	toh	1	7 11-	8 - 89
OPERATOR CERTIFICATION				
I certify under penalty of law that I have person documents, and that based on my inquiry of the submitted information is true, accurate, and comincluding the possibility of fine and imprisonment.	se individuals imme	diately responsible for	r obtaining the informat	ion I believe that the
ME (print or type)	SIGNATURE		DATE SIGNE	:D ,
W. E. Fisher, President	as A	t	9/	29/98
	Page 4 (of 5		

V. DESCRIPTION OF DANGEROUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM SECTION D(1) ON PAGE 3.

OWNER CERTIFICATION

I certify under penalty of law that I own the real property described in, and am aware of the contents of, this permit application, and that I have received a copy of this application. As owner of the real property, I understand that I am responsible for complying with any requirements of Chapter 173-303 WAC with which only I am able to comply, and that there are significant penalties for failure to comply with such requirements.

Port of Seattle	_
John Az	
Signature	
	/
John G. Belford	
	1 1

Name (Type or print)

Deputy	Executive	Director	
Title			

August 31, 1989
Date

Chempro

Pier 91 Part B Permit Application

Instructions

- 1) Replace page 4 Of 5 of the Part A in Section A
- 2) Replace page K 2 with new page K 2 in Section K

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. FACILITY DRAWING			
All existing facilities must include in the space provided on page 5 a scale drawing	of the facility (see instructions	for more detail).	
I. PHOTOGRAPHS		•	
All existing facilities must include photographs (aerial or ground—level) that clearly sites of future storage, treatment or disposal areas (see instructions for more detail,	delineate all existing structures;	existing storage.	treatment and disposal areas; and
II. FACILITY GEOGRAPHIC LOCATION			
LATITUDE (degrees, minutes, & seconds)	LC	ONGITUDE (degrees	s, minutes, & seconds)
4 7 3 8 0 8 N		1222	2 5 0 W
		1 2 2 2	12 5 0 W
III. FACILITY OWNER			*
A. If the facility owner is also the facility operator as listed in Section VII on Form 1,	"General Information", place an "	"X" in the box to the	left and skip to Section IX below.
		i -	
B. If the facility owner is not the facility operator as listed in Section VII on Form 1, c	omplete the following items:		
1. NAME OF FACILITY'S LEGAL OWN	IER .	*	2. PHONE NO. (area code & no.)
PORT OF SEATTE			2 10 16 3 18 12 3 3 17 10
3. STREET OR P.O. BOX	4. CITY OR TOWN		5. ST. 6. ZIP CODE
P ₁ O ₁ B ₁ O ₁ X ₁ 12 0,9, S ₁ E ₁ A ₁ T	T,L,E,		v A 9 8 1 1 1 1
. OWNER CERTIFICATION			
I certify under penalty of law that I have personally examined and documents, and that based on my inquiry of those individuals imm	d am familiar with the in	formation subm	nitted in this and all attached
submitted information is true, accurate, and complete. I am aware	that there are significa	ent penalties fo	r submitting false information,
including the possibility of fine and imprisonment.			
ME (print or type)	u l	D	ATE SIGNED
JOHN G. BELFORD	A I		11-8-89
OPERATOR CERTIFICATION	my		
or annual central cent			
I certify under penalty of law that I have personally examined and	d am familiar with the in	formation subm	nitted in this and all attached
documents, and that based on my inquiry of those individuals imm submitted information is true, accurate, and complete. I am aware	rediately responsible for	obtaining the	information, I believe that the
including the possibility of fine and imprisonment.	mat mere are significal	nt penantes to	submitting talse information,
ME (print or type) SIGNATURE		1.5	ATE SIGNED
3.5.1.1	4		C/
W. E. Fisher, President	1		7/29/98
Page 4	of 5		

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Port of Seattle	_
John Az	
Signature	
	•

John G. Belford
Name (Type or print)

Deputy Executive Director
Title

August 31, 1989
Date